REMARKS

This application has been amended so as to place it in condition for allowance.

The Official Action states that the list of references in the specification is not a proper Information Disclosure Statement. Applicant will prepare an IDS in conformance with U.S. practice and file it shortly.

Applicant will provide a substitute specification that meets the requirements of U.S. practice shortly.

The Official Action objects to claim 15 for inclusion of the term *resp.*, which term has been removed from claim 15 by way of the present amendment.

The Official Action rejects claims 15, 16, 21, 22, 25, and 26 under 35 U.S.C. §102(e) as anticipated by ROLNICK et al. The Official Action separately rejects claims 17-19 under 35 U.S.C. §103(a) as unpatentable over the same reference. Reconsideration and withdrawal of both rejections are respectfully requested for the following reasons:

The ROLNICK et al. reference discloses a method for splinting rib injuries. The method of ROLNICK et al. includes placing two anchor strips on the chest wall approximately equidistant from the rib injury (not covering the injury) in a more or less vertical orientation, and placing elastomeric straps across the injury in a more or less horizontal manner so as to produce a stabilizing force on the injury site. The elastomeric

straps are removably affixed to the anchor strips by hook and loop fasteners.

An initial tension is supplied to the elastomeric straps during placement. In this manner a reducing force is produced across the injury site regardless of the degree of chest expansion, the reducing force increasing with increasing expansion of the chest.

The rate of increase in the reducing force as a function of degree of chest expansion is determined by the spring-constant of the elastomeric strap. Elastomeric straps having a low spring-constant will provide less increase in the reducing force with increased chest expansion than elastomeric straps having a relatively higher spring-constant. By choosing the proper combination of elastomeric strap spring-constant and initial tension in the strap, a reducing force profile may be created which provides maximum patient comfort (col. 2, lines 8-27).

In the ROLNICK et al. device, as seen, *e.g.*, in Fig. 5, elastomeric straps 10, 11, 12, which run parallel to the ribs 50, 51, 53, are used to apply a tension to the ribs, which is parallel to the longitudinal axis of the ribs. As a result, both sides of the fractured rib 51 are pressed against each other at the fracture 54 thereby causing pain to the person involved.

On the other side, the fractured rib 51 and its neighbouring ribs 50 and 53 are only connected by the two

vertically applied medial and lateral anchor strips 2 and 6 (Fig. 1), which are formed of a compliant material such as polymeric foam (col. 3, lines 64-66), and thus are not suitable to stabilize the fractured rib 51 by creating a load-bearing connection between the parts of the fractured rib 51 and its neighboring ribs 50, 53.

In the device of the present claims, a deformable but substantially rigid plate-like one-piece splint element is used that covers the fractured rib at both sides of the fracture, as well as the neighbouring ribs in an adherent fashion to build a mechanically stable "bridge" between the neighbouring ribs spanning the intermediate area between the neighbouring ribs and bearing the fractured rib at both sides of the fracture. In this way, the fractured rib is immobilized without putting extra pressure on the fracture, resulting in pain relief for the patient.

The means for implementing the method for splinting rib injuries described in the ROLNICK et al. reference fundamentally differs from the immobilizing device of the present claims. In the prior art, many elements are provided to splint ribs: anchor strips, elastomeric straps, a plurality of fasteners on the strips, and a plurality of fastener receivers on the straps which are connected to each other and to the body of the patient in a manner allowing a certain movement of the ribs independently from each other due to the elastomeric straps.

In stark contrast to the ROLNICK et al. device, the present device uses only a single-piece splint element which does not allow movement of the ribs relative to each other but immobilizes the ribs of the related area as to "synchronize" the movement of the ribs within the region covered by the splint element due to the rigidity of the splint element and the arrangement thereof along a large area. No elastomeric element is used.

In order to highlight the substantial differences between the teaching of ROLNICK et al. and the present device as claimed, Applicant has amended claims to define the central splint element with higher precision.

Accordingly, the ROLNICK et al. reference neither anticipates nor renders obvious the device as now claimed.

A new claim 28 has been added regarding the perforation of the splint element, reciting a set of features absent from ROLNICK et al. as well as all other known prior art. This feature was disclosed in the specification as originally filed, at least on the final page of the description.

Furthermore, new claims 29, 30 and 31 correspond to claims 20, 23, and 14, respectively, which the Official Action characterizes as allowable but for their dependence from rejected base claims. Therefore, irrespective of the disposition of the other amended claims, these claims should be in condition for immediate allowance in any event.

Should there be any matters that need to be resolved in the present application, the Examiner is respectfully requested to contact the undersigned at the telephone number listed below.

The Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 25-0120 for any additional fees required under 37 C.F.R. § 1.16 or under 37 C.F.R. § 1.17.

Respectfully submitted,

YOUNG & THOMPSON

Eric Jensen, Reg. No. 37,855
745 South 23rd Street
Arlington, VA 22202
Telephone (703) 521-2297
Telefax (703) 685-0573
(703) 979-4709

EJ/ej